

Agenda Item 1v

Report to:	Board of Directors	Date: 7 May 2020
Report from:	Chief Executive	
Principal Objective/ Strategy and Title	Chief Executive Report	
Board Assurance Framework Entries	Governance	
Regulatory Requirement	N/A	
Equality Considerations	None believed to apply	
Key Risks	N/A	
For:	Information	

1. Purpose/Background/Summary

This report provides the Trust Board with a monthly update from the Chief Executive.

2. Our response to the COVID-19 pandemic

The last month has been an exceptionally busy one for all of us at Royal Papworth Hospital. During recent weeks we have seen a huge expansion of our critical care department and in particular our ECMO service, as increasing numbers of patients became seriously ill with COVID-19. In total, we have now cared for 110 patients with confirmed COVID-19 of whom the majority needed intensive care. We have been able to discharge 48 patients with confirmed COVID-19, but sadly, 20 patients who had tested positive have died in our hospital. Our thoughts are with them and their families, and with our staff who cared for these patients.

The way we have been able to adapt and respond to the challenges presented by COVID-19 is a real testament to the expertise, compassion and resilience of our staff. People of all levels and backgrounds have shown an extraordinary commitment providing the highest possible level of care to as many patients as possible.

We now move into a new phase of the pandemic, having passed the first peak of hospitalisations. While the future remains uncertain, we at Royal Papworth Hospital will remain committed to the patients, with COVID-19 and other conditions, who most need our help.

3. Operational update

3.1 Recovering our elective activity

As the number of COVID-19 patients has plateaued and even begun to fall, we have been planning how we will recover our usual services and begin elective activity

again. We have reviewed all of our waiting lists and are carrying out a small number of cardiac surgery procedures for the most urgent patients. Our Respiratory Medicine team has also started to see elective patients, particularly those beginning Continuous Positive Airway Pressure (CPAP) treatment in the first instance. Our cardiology service has continued to deliver all of its outpatient activity via video or telephone clinics and is now carrying out a small number of elective procedures.

3.2 Reduction in emergency admissions/urgent referrals

Although we have remained open for urgent and emergency care throughout the last month, we have seen a significant fall (around 50 per cent) in the number of heart attack patients coming into the hospital. Lung cancer referrals have also fallen by around half. We are concerned that this could mean that patients are too anxious to come into the hospital during the COVID-19 outbreak and have been working with our Communications team to try to reassure the public that they will be cared for safely if they do need to come to hospital.

3.3 Staff and patient testing

We are now screening all inpatients for COVID-19, in line with national guidance. In the last month, we have set up a mobile testing centre for staff in front of the hospital which provides testing facilities for symptomatic NHS staff (or a symptomatic member of their household) across the Cambridgeshire and Peterborough Sustainability and Transformation Partnership (STP). Last week we took part in a national NHS project to also test 500 asymptomatic staff members to help assess the prevalence of COVID-19 amongst the general population.

3.4 Regional 'surge' centres

On 17 April the Norfolk and Norwich University Hospital (NNUH) was nominated as the East of England Regional Surge Centre (RSC). The purpose of the RSC is to provide backup and support for NHS hospitals in the region and to ensure that patients needing specialist care get the support they need. The Cambridge Biomedical Campus (Cambridge University Hospitals and Royal Papworth) continues to work with regional colleagues to develop our collective thinking on how best to support the region's patients and hospitals both now and in the future. As our collective knowledge develops on the continued duration and prevalence of Covid-19, the trust and region are focused on designing services (be they RSC's or not) to maximise the benefit the NHS can provide to both Covid-19 and non-Covid-19 patients.

3.5 Personal Protective Equipment

Personal Protective Equipment (PPE) has been the subject of some media interest over the last month. The combined supply and distribution challenges posed by a global pandemic have been extraordinary. Indeed, the head of the UK's armed forces, General Sir Nick Carter, recently described PPE sourcing and distribution as *"the single greatest logistic challenge"* he has come across.

On supply, there are three main issues;

- Firstly, the global demand for PPE has risen exponentially (in line with the number of cases of the virus);
- Secondly, this has occurred at a point when the global supply of PPE has reduced (China - the single biggest producer of PPE - closed much of its manufacturing sector in order to combat the proliferation of virus. Several other countries have placed export bans on the sale of PPE); and
- Finally, the UK does not have a large-scale domestic PPE manufacturing industry to draw on.

These three issues have led to a scarcity of specific products at points in time over the last month, and continue to generate uncertainty over future supply.

On distribution the scarcity of PPE makes accurate distribution to areas of need even more important. This has been particularly challenging due to the unpredictable nature of demand changes (as outbreaks spread in particular locations rapidly and less so in others), combined with the necessary extension in scope of the NHS's distribution network over the last four weeks (the NHS supply chain was designed to accommodate deliveries to 226 NHS trusts. It is now providing essential PPE supplies to 58,000 different providers including care homes, GP surgeries, hospices and community care organisations).

Royal Papworth Hospital has not been immune to these challenges. However, as a result of the hard work of staff (particularly within Estates and Procurement), the Trust has (to date) fared well. The procurement of non-sterile gowns has been extraordinarily challenging, and on 22 April, in a planned move, the Trust changed the PPE provided to staff from disposable gowns to PHE approved disposable coveralls. It is anticipated that by the time of our Board meeting staff will be back in the PHE-approved gowns.

The Trust continues to work across a number of fronts to keep its staff safe, and has developed contingency plans against key products that could be enacted in the case of a worsening of the position on PPE.

4 Financial update

4.1 Summary of 2019/20 financial position

It already seems a long time ago, but the end of the 2019/20 financial year saw the Trust post a surplus of £2.3m, a financial performance that was £0.4m better than control total. This successful result, in the context of a year in which services moved into the new hospital site and the Trust responded to the emerging threat of Covid-19, is yet another reminder of the extraordinary commitment and hard work of our staff.

4.2 Looking ahead to 2020/21

Looking forward, 2020/21 is a year of some uncertainty. The NHS financial framework has been significantly re-designed in the last 6 weeks, and as a result the Trust has a greater degree of certainty over its short-term financial performance. After the end of July much will depend on the progression of COVID-19 and the way that both the Trust and the wider NHS respond. As noted above, the Trust continues to work with regional colleagues to develop our collective thinking on the operational model that best supports the regions patients and hospitals. The Trust is committed to supporting the development financial mechanisms that adequately support this aim.

5. Clinical update

5.1 Outcomes for COVID-19 patients in our hospital

Royal Papworth Hospital continues to accept patients from across our region and preliminary analysis suggest that the outcomes for patients we look after are very good, particularly considering the fact that we accept the sickest patients. This

encouraging news needs to be tempered with the knowledge that patients in our hospital have died in spite of the excellent nursing and medical care they have received. Our ECMO service has surged to an unprecedented level with 19 patients currently receiving this support; NHS England has asked us to provide up to 25 beds if this is required. Our ECMO service has so far provided advice on more than 160 patients to clinicians across our region.

5.2 Participation in research into possible treatments for COVID-19

Every patient who is eligible has been recruited into a clinical trial to assess possible treatments for COVID-19. At present we have recruited more than 60 patients into the national RECOVERY trial and, as the pandemic continues, we will also open other trials that offer even more innovative therapies that would otherwise be unavailable. Our clinical trial activity has been enhanced by the close relationships between Royal Papworth Hospital and our campus partners.

5.3 Family Liaison team

The restrictions on hospital visiting during the COVID-19 outbreak, while important for minimising the spread of infection, have been extremely difficult for the families of patients who are seriously ill with the disease. For this reason, I am incredibly grateful to the Critical Care team for setting up a dedicated Family Liaison team to provide regular updates to relatives of patients in critical care. The team – which is made up of clinical staff who are unable to work in patient-facing roles at the moment – have made an enormous difference to relatives by providing accurate, compassionate and timely updates on their loved one's condition.

6 Workforce and employee engagement

6.1 Supporting staff during the COVID-19 outbreak

We are acutely aware of the pressure that working in the NHS during a global pandemic is placing on our staff. Since the beginning of the outbreak, we have taken a number of actions to support our staff members' physical and emotional wellbeing, including making free food and drink available on site, holding a number of live and virtual 'resilience' sessions and signposting staff to our employee assistance telephone line. We are hugely grateful to Royal Papworth Charity for supporting many of these initiatives, and to members of the public and the business community for supporting the charity's COVID-19 appeal. We are also aware of the challenges faced by the significant number of our staff members who are self-isolating or 'shielding' because they have underlying health conditions which put them at greater risk from COVID-19. We have put in a place a team of 'Keeping in Touch' managers to ensure these staff members have the support they need at this time.

6.2 Recruitment update

Despite the challenges of COVID-19, we have been carrying out a significant amount of recruitment activity and have recruited 132 new starters (including 75 nurses) who are due to join us in the coming months. In addition to our 'normal' recruitment activity, we have recruited 110 temporary workers in the last 4 weeks to support our COVID-19 response (including nurses, student nurses, medical students, healthcare support workers and housekeepers). I would like to thank everyone who has been involved in recruiting these staff members – they will no doubt make a significant contribution to our work in the weeks and months ahead.

7. Governance

The response to COVID-19 has seen changes in how we are managing the business of the Trust. Since declaring a critical incident in the hospital at the end of March, we have put in place arrangements to ensure that essential business is supported and to allow the Trust's governance and decision-making processes to continue while we are managing this major incident. As a result, we have postponed non-essential committee workload and executive directors have reviewed agendas with committee chairs so that deferred items can be identified and included in recovery planning.

We have also put in place virtual arrangements across many of our committees to allow business to continue. With support from our colleagues in the Digital team, all of our non-executive directors have been able to join board and committee meetings remotely and we have increased the frequency of our board meetings in order to support the operational response to COVID19.

We are staying in touch with the Board of Directors and our staff through daily briefings and have provided separate governor updates to ensure that our governing body is kept up to date with the work of the Trust and its response to the COVID-19 pandemic. We held a successful online governor briefing last week and are looking at how we can use that technology to bring our governors together on a more regular basis going forward.

8 Digital update

8.1 Cyber security

The COVID-19 outbreak has resulted in significant global cyber threats, as criminals seek to exploit individuals and organization, in many cases using the pandemic as an excuse to gain access to sensitive data or cause disruption to vital IT networks that support health and care services. Our Digital team is keeping a close eye on potential cyber threats and is advising staff to be vigilant.

8.2 Virtual patient clinics

Last week we launched virtual patient clinics using the NHS' 'Attend Anywhere' system, beginning with a pilot for cystic fibrosis patients led by Dr Chris Jonhson. We expect to increase this service to help us maintain face-to-face communication with patients who are staying at home over the coming months.

9. News and updates

9.1 Royal Papworth Charity COVID-19 Appeal

We are extremely grateful to the public and business community for their support for the Royal Papworth Hospital Charity Appeal. Money raised is being used to fund the provision of food, drink and other items such as hand cream to staff working exceptionally hard at the moment. Funds will also be used towards psychological support for staff whose emotional wellbeing has been affected by the COVID-19 crisis. I'd also particularly like to thank members of the public who have been supporting the hospital by sewing scrubs for our staff members, given the increasing number of staff who are wearing scrubs at work at the moment.

9.2 Long-term inpatient receives transplant during COVID-19 outbreak

Despite the COVID-19 outbreak, our Transplant team has been able to carry out two transplants in April, which is a real tribute to their commitment to our transplant patients. One patient, Phill Hardwell, had been an inpatient at Royal Papworth for

five months and had undergone eight surgeries before receiving his transplant last month. He is now recovering at home with his wife and two young children.

9.3 **Media activity**

In the last month, Royal Papworth Hospital has featured several times in the media, including two reports on BBC Look East about the hospital's response to the COVID-19 outbreak and our concerns about urgent and emergency patients being too anxious to come to hospital. You may also have seen a story in The Telegraph and other outlets about the family of Professor Stephen Hawking donating ventilator the hospital, or the diary of one of our critical care doctors, Dr Chinmay Patvardhan, which was published by The Sun. We have also been keeping our patients and the public updated with news from the hospital in the local media and via our website and social media channels.

9.4 **Anniversary of hospital move**

Last Friday 1 May marked exactly a year since we began treating patients in our new hospital. This time last year, we could never have predicted that we would find ourselves at the centre of a global pandemic one year on. However, there is no doubt that our experience of moving a hospital and managing an ongoing 'command and control' centre has proved useful in recent weeks. The design of our new hospital – with its single patient rooms, air ventilation system and flexible layout – has been incredibly helpful in managing a highly infectious, airborne disease. Most importantly, our fantastic staff – who worked so hard to deliver a safe and successful move last year – have again shown their extraordinary commitment in responding to the challenges of COVID-19. I would like to thank our catering provider, OCS, who baked 1,000 cup cakes to recognise our anniversary last week, as well as the many patients who sent in video messages of support. The last 12 months will no doubt be remembered as a historic year for all of us at Royal Papworth Hospital.